

Headquarters U.S. Air Force

Integrity - Service - Excellence

AFMS Group



**11 Aug 04
1300-1530**

U.S. AIR FORCE

AFMS Group Agenda

- **Approval of Minutes**
- **FY04 UFRs - Col Hanson**
- **Force Development Budget Issue - Lt Col Swinson**
- **Open Discussion**

Minutes Approval

- **4 Aug 04 AFMS Group Minutes - Approved?**
- **Archives of AFMS Corporate Structure minutes can be found at:**
 - **O:\SG_Common\AFMS Corporate Structure**
- or -
 - **<https://kx.afms.mil/afmsengineerroom>**

Headquarters U.S. Air Force

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FY04 UFRs



**Col Hanson
HQ USAF/SGSR**

U.S. AIR FORCE

Headquarters U.S. Air Force

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Dental Operations Panel FY04 UFRs: Candidates for EOY Fallout



11 Aug 04

U.S. AIR FORCE

Prioritized UFR List for EOY Fallout

- 1. Dental Processing Digital Conversion Initiative
\$504K**
- 2. AEGD-2 Masters Degree Program Funding \$26K**

Dental Processing Digital Conversion Initiative

BACKGROUND:

Dental Processing at Lackland AFB serves as the gateway for all enlisted training. A panoramic x-ray and dental classification is completed on all Basic Military Trainees in the first week of training. Conversion to digital technology is essential for the cost effective dental readiness classification of Trainees in preparation for worldwide duty.

ADJUSTMENT:

Start-up costs for FY04 include funds needed to replace aging equipment, infrastructure, initial supply, software training, support and implementation. Costs in FY05 and beyond would be strictly printer supply and software support costs.

FUNDING (\$M):	FY 2004	FY 2005	FY2006	FY2007
~~CURRENT PROGRAM~~	~~FY2004~~ .093	~~FY2005~~ .093	.093	.093
ADJUSTMENT	.093 .504	.093(.040)	(.040)	(.040)
REVISED PGM TOTAL	(.040)	.430		

PROCUREMENT	FY04	FY05	FY06	FY07	FY08	FY09	MANPOWER	FY04	FY05	FY06	FY07	FY08	FY09
Software	NT	10K		.053	0	.523	OFFICER	0	0	0	0	0	0
0	0	0					ENLISTED	0	(1)	0	0	0	0
Training		12K	3K	3K	3K		CIVILIAN	0	0	0	0	0	0
3K	3K												
Equip/Supplies		410K	50K	50K									
IMPACTS	50K	440K											
50K													

- Mission essential equipment utilized during dental processing of Basic Military Trainees to detect pre-existing dental disease and abnormal anatomic structures—provides statistically accurate Dental Readiness Classification of Basic Trainees
- Replacement of dental radiographic equipment 3 years past its life expectancy and failing due to constant use
- Savings of one FTE within Dental Processing and elimination of \$40-50K/Year of supply costs associated with chemical processing of film, disposal of hazardous wastes and management of physical waste film
- Allows creation of a dental panoramic image repository for all active duty and

AEGD-2 MASTERS DEGREE PROGRAM FUNDING - GWU

BACKGROUND:

Quality and number of AEGD-2 residents have declined from 16 per class year (1998) to current 5-10 per class. Masters degree will improve competitiveness and attraction of program; maintains parity with comparable Navy program. All enrolled residents are interested. Concurrent credits plus 6 hours satisfy degree requirements.

Total cost of program is 2K per year per resident; two classes with max 10 resident per year totals 40K per year beginning 2004. Complete turn-key program with no add-ons or additional fees. First grads possible 2005.

<u>FUNDING (\$M):</u>	<u>FY 2004</u>	<u>FY 2005</u>	<u>FY 2006</u>	<u>FY 2007</u>	<u>FY 2008</u>	<u>FY 2009</u>
<u>CURRENT PROGRAM</u>	0	0	0	0	0	0
<u>ADJUSTMENT</u>	26K	34K	40K	40K	40K	40K
<u>REVISED PGM TOTAL</u>	26K	34K	40K	40K	40K	40K

<u>PROCUREMENT</u>	<u>FY04</u>	<u>FY05</u>	<u>FY06</u>	<u>FY07</u>	<u>FY08</u>	<u>FY09</u>	<u>MANPOWER</u>	<u>FY04</u>	<u>FY05</u>	<u>FY06</u>	<u>FY07</u>	<u>FY08</u>	<u>FY09</u>
Item 1 <u>NT</u>							OFFICER						
Item 2							ENLISTED						
							CIVILIAN	Manpower Neutral Program					
	Not Applicable												

IMPACT

Makes AF AEGD-2 program comparable with civilian programs; degree requirement common in leadership roles

-Total Force Development: Gen Jumper's 'Chief's Sight Picture' (Nov 02) addressed competition for command and

leadership positions; calls for resident-level PME with relevant associated advanced degree in field of study

-Standard curriculum satisfies nearly all Masters requirements; only 2 additional GWU courses (6 hours) required

-Additional work will complement program without affecting current requirements;

didactic load will be increased

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Medical Operations Panel



U.S. AIR FORCE

Medical Operations Panel

FY04 UFR Priority List

<u>MAJCOM</u>	<u>ITEM</u>	<u>PRIORITY</u>	<u>AMOUNT</u>
USAFE	Storknesting at Incirlik	1	\$200K
AFSOC	AFSOC Travel	2	\$8K
USAFA	Emer. Room Nurses (3 FTE)	3	\$243.5K
AFSOC	Medical Supplies (Panel ?)	4	\$140K
AFSOC	P-Phones for Life Skills	5	\$7K
Total			\$598.5K

Unclassified
USAFE FY04 UFR - Storknesting from Incirlik UNCLASSIFIED

BACKGROUND:

A recent review of obstetrics operations at the local civilian hospital, in Adana, resulted in the temporary termination of OB services to TRICARE beneficiaries stationed at Incirlik. Expectant Moms are required to fly to Spangdahlem AB for OB services prior to the 35 week point.

ADJUSTMENT:

NT:

The lengthy TDYs for storknesting create an unplanned increase in TDY costs for Incirlik and USAFE.

<u>FUNDING (\$M): PEC</u>	<u>FY 2004</u>	<u>FY 2005</u>	<u>FY 2006</u>	<u>FY 2007</u>	<u>FY 2008</u>	<u>FY 2009</u>
<u>CURRENT PROGRAM</u>	0	0.0	0.0	0.0	0.0	0.0
<u>ADJUSTMENT</u>	0.2					
<u>REVISED PGM TOTAL</u>	0.2					

<u>PROCUREMENT</u>	<u>FY04</u>	<u>FY05</u>	<u>FY06</u>	<u>FY07</u>	<u>FY08</u>	<u>FY09</u>	<u>MANPOWER</u>	<u>FY04</u>	<u>FY05</u>	<u>FY06</u>	<u>FY07</u>	<u>FY08</u>	<u>FY09</u>
Item 1 <u>NT</u>							<u>OFFICER</u>	0	0	0	0	0	0
Item 2							<u>ENLISTED</u>	0	0	0	0	0	0
							<u>CIV - GS</u>	0	0	0	0	0	0
							<u>RES</u>	0	0	0	0	0	0
							<u>SHARE</u>	0	0	0	0	0	0
							<u>CONTRACT</u>	0	0	0	0	0	0

N/A

IMPACTS:

- Unexpected, lengthy TDYs negatively impact Incirlik's TDY budget
- Cost is unavoidable and is a standard of care, quality of life issue
- If unfunded, USAFE will have to decrement other USAFE programs to cover the cost of this short notice, unplanned change in services

EEIC 409 - Travel, SGO, CLASS 2**BACKGROUND:**

PEC 87700 RCCC 265484 Inbound Behavioral Health provider cancelled by AFPC for credentialing problem. Currently provider manning is 3 (1 of which is a reservist) and the manpower requirement is 4. Cancellation of projected inbound exacerbates existing shortfall problem in mission critical area. Require \$6K to extend existing reservist thru end of FY04. Will come back with additional requirement for first 1-2 months of FY05 depending upon replacements projected arrival. Also incurred \$2K HHG storage Requirement for deploying non-patient (PCN duty). No more offset funding exists. Expense is now eating into patient travel.

<u>FUNDING (\$M):</u>	<u>FY 2004</u>	<u>FY 2005</u>	<u>FY 2006</u>	<u>FY 2007</u>	<u>FY 2008</u>
CURRENT PROGRAM	\$0.0	0.0	0.0	0.0	0.0
ADJUSTMENT	\$8K	0.0	0.0	0.0	0.0
REVISED PGM TOTAL	\$8K	0.0	0.0	0.0	0.0

<u>PROCUREMENT</u>	<u>FY03</u>	<u>FY04</u>	<u>FY05</u>	<u>FY06</u>	<u>FY07</u>	<u>FY08</u>	<u>MANPOWER</u>	<u>FY03</u>	<u>FY04</u>	<u>FY05</u>	<u>FY06</u>	<u>FY07</u>	<u>FY08</u>
<u>NT</u>							OFFICER	0	0	0	0	0	0
							ENLISTED	0	0	0	0	0	0
							CIVILIAN	0	0	0	0	0	0

If Applicable

IMPACTS:

- Mission critical
- Must pay special storage of temporary HHG for deployment. Lack of funding would mean denial of deployment/travel entitlements.
- Post traumatic stress cases aren't adequately handled in civilian treatment facilities and Eglin has manning issues of their own in this same area.
- Expeditious treatment of members returning from difficult deployments is especially important at 16 MDG.

USAFA UFR - EEIC 571 Emergency Room Nurses

BACKGROUND:

Registered Nurses (3 FTE) needed in USAF Academy Emergency Room. Standard of care not being met; patients often are not being triaged by nurse upon entry into ER as required by JCAHO. Short staffing in ER creates life threatening environment and enormous waiting times when patient volume is high.

ADJUSTMENT:

Requirements: \$243.5K - Funded: \$0 = \$243.5K

FUNDING (\$000):	<u>FY 2004</u>	<u>FY 2005</u>	<u>FY 2006</u>	<u>FY 2007</u>	<u>FY 2008</u>	<u>FY 2009</u>
~~STUDENT PROGRAM~~	0.0	0.0	0.0	0.0	0.0	0.0
ADJUSTMENT	243.5	255.7	0.0	0.0	0.0	0.0
REVISED PGM TOTAL	243.5	255.7	0.0	0.0	0.0	0.0

<u>PROCUREMENT</u>	<u>FY04</u>	<u>FY05</u>	<u>FY06</u>	<u>FY07</u>	<u>FY08</u>	<u>FY09</u>	<u>MANPOWER</u>	<u>FY04</u>	<u>FY05</u>	<u>FY06</u>	<u>FY07</u>	<u>FY08</u>	<u>FY09</u>
Item 1 <u>NT</u>							OFFICER	0	0	0	0	0	0
Item 2							ENLISTED	0	0	0	0	0	0
							CIVILIAN	0	0	0	0	0	0
If Applicable							If Applicable						

IMPACTS:

- **REQUIREMENT: \$243.5K to fund (FY04) 3 nurses to bring USAFA ER in compliance with SOC**
- **Emergency Nursing Association requires 2 nurses per shift to meet standard of care**
- **Patient safety issue--At peak times there is no nurse available to triage**
- **Liability claims can be huge dollar items, and USAFA needs to avoid additional negative publicity**
- **Gap fill funding required in FY04/FY05; FY06 MRT Laydown for FAC 5220**

UNCLASSIFIED current year under-funding relative to SOC by increasing additional positions for 14 RN (PLATE 10) POC: Maj Binks

EEIC 604 - Medical Supplies, SGO, CLASS 2**BACKGROUND:**

PEC 87700 RCCC 265853 FY03 financial shortfall forced flu vaccine costs into FY04.

~~This shortfall will have a financial cascading effect for future FYs unless it is~~
addressed in FY04. This disconnect was highlighted in the AF/SG sponsored

~~Financial Efficiency Audit~~ by Mr. Dornin.

ADJUSTME
NT:

No flex in remaining FY04 program/no offsets available.

FUNDING (\$M):

	<u>FY 2004</u>	<u>FY 2005</u>	<u>FY 2006</u>	<u>FY 2007</u>	<u>FY 2008</u>
CURRENT PROGRAM	\$0.0	0.0	0.0	0.0	0.0
ADJUSTMENT	\$140K	0.0	0.0	0.0	0.0
REVISED PGM TOTAL	\$140K	0.0	0.0	0.0	0.0

<u>PROCUREMENT</u>	<u>FY03</u>	<u>FY04</u>	<u>FY05</u>	<u>FY06</u>	<u>FY07</u>	<u>FY08</u>	<u>MANPOWER</u>	<u>FY03</u>	<u>FY04</u>	<u>FY05</u>	<u>FY06</u>	<u>FY07</u>	<u>FY08</u>
<u>NT</u>							OFFICER	0	0	0	0	0	0
							ENLISTED	0	0	0	0	0	0
							CIVILIAN	0	0	0	0	0	0

If Applicable

IMPACTS:

- Mission essential readiness issue.
- This situation will perpetuate itself every year unless funding can be provided to bring this program back on track.
- If funding isn't provided this FY, will have to delay flu shots 2-3 months. This could cause a rise in the number of influenza cases early in the fall.

EEIC 604 - Life Skills, RCCC 265484, Panel SGO, CLASS 2**BACKGROUND:****Priority 6:**

Due to FY04 shortages, Moody has been unable to purchase or request funds for Life Skills requirements. A requirement for P-Phones (\$4,600) is for quality/standard of care. Remaining \$2,400 is for efficiency/workflow. These items were approved at an ERAA meeting, but due to command shortages, we were unable to address this

ADJUSTMENT: None.

<u>FUNDING (\$M):</u>				<u>FY 2003</u>	<u>FY 2004</u>	<u>FY 2005</u>	<u>FY 2006</u>	<u>FY 2007</u>	<u>FY 2008</u>
<u>STUDENT PROGRAM</u>				\$0.0K	4.5K	0.0	0.0	0.0	0.0
<u>ADJUSTMENT</u>				0.0	7.0	0.0	0.0	0.0	0.0
<u>REVISED PGM TOTAL</u>				\$0.0K	11.5K	0.0	0.0	0.0	0.0

<u>PROCUREMENT</u>	<u>FY03</u>	<u>FY04</u>	<u>FY05</u>	<u>FY06</u>	<u>FY07</u>	<u>FY08</u>	<u>MANPOWER</u>	<u>FY03</u>	<u>FY04</u>	<u>FY05</u>	<u>FY06</u>	<u>FY07</u>	<u>FY08</u>
Item 1	<u>NT</u>						OFFICER	0	0	0	0	0	0
Item 2							ENLISTED	0	0	0	0	0	0
	If Applicable						CIVILIAN	0	0	0	0	0	0
If Applicable													

IMPACTS

- Quality/Standard of Care. P-Phones (\$4.6K) would provide additional opportunity to more easily comply with HIPAA guidelines in protecting patient confidentiality. Additionally, the phones would provide better security by increasing the difficulty for irate patients to access providers.
- Workflow efficiency is compromised for smaller items approved unfunded at the ERAA (\$2,400). No major impact.

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Medical Support Panel FY04 UFRs: Candidates for EOY Fallout



11 Aug 04

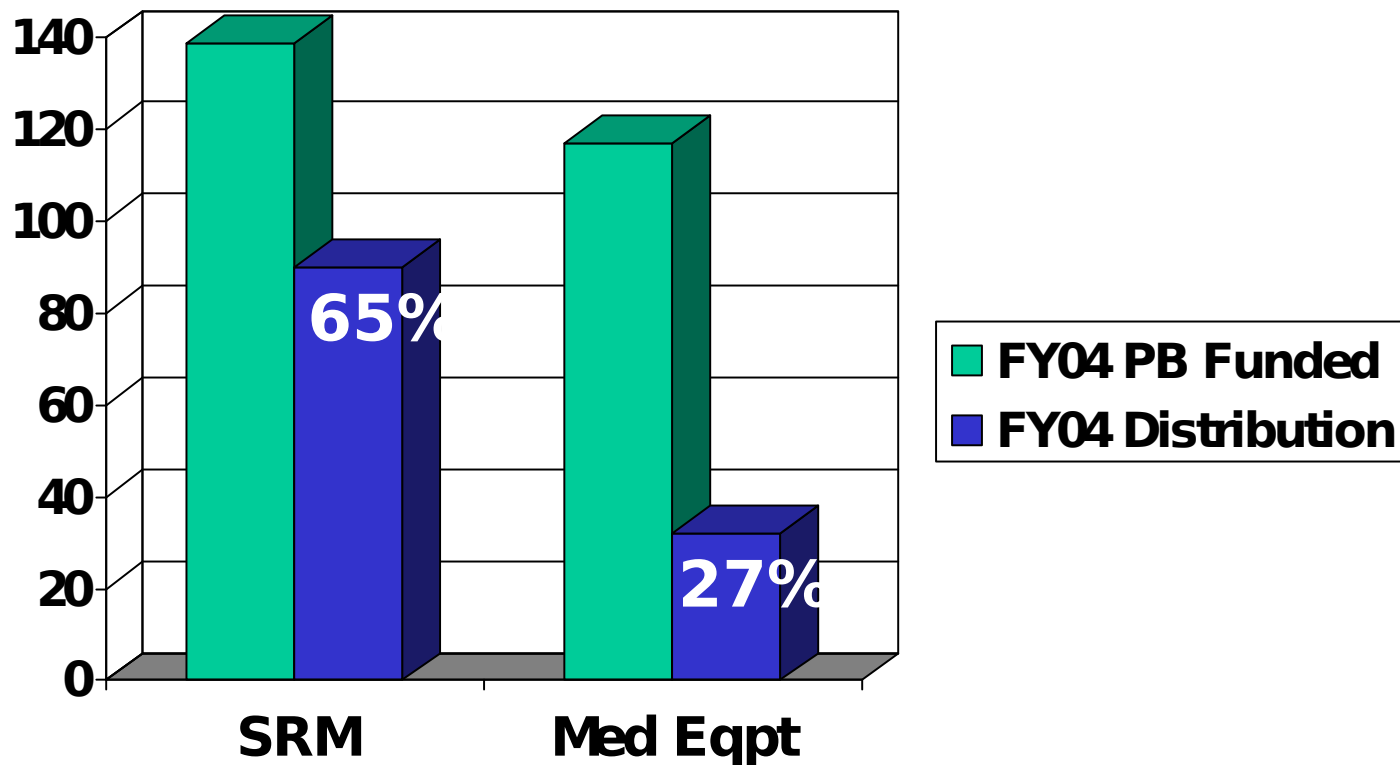
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Prioritized UFR List for EOY Fallout

- 1. MTF Comparative Cost & Workload Analysis** \$170K
- 2. SRM - Imminent Mechanical System Failures** \$604K
- 3. Medical Equipment** \$30M
- 4. SRM** \$30M

Background: FY04 Bill Payers

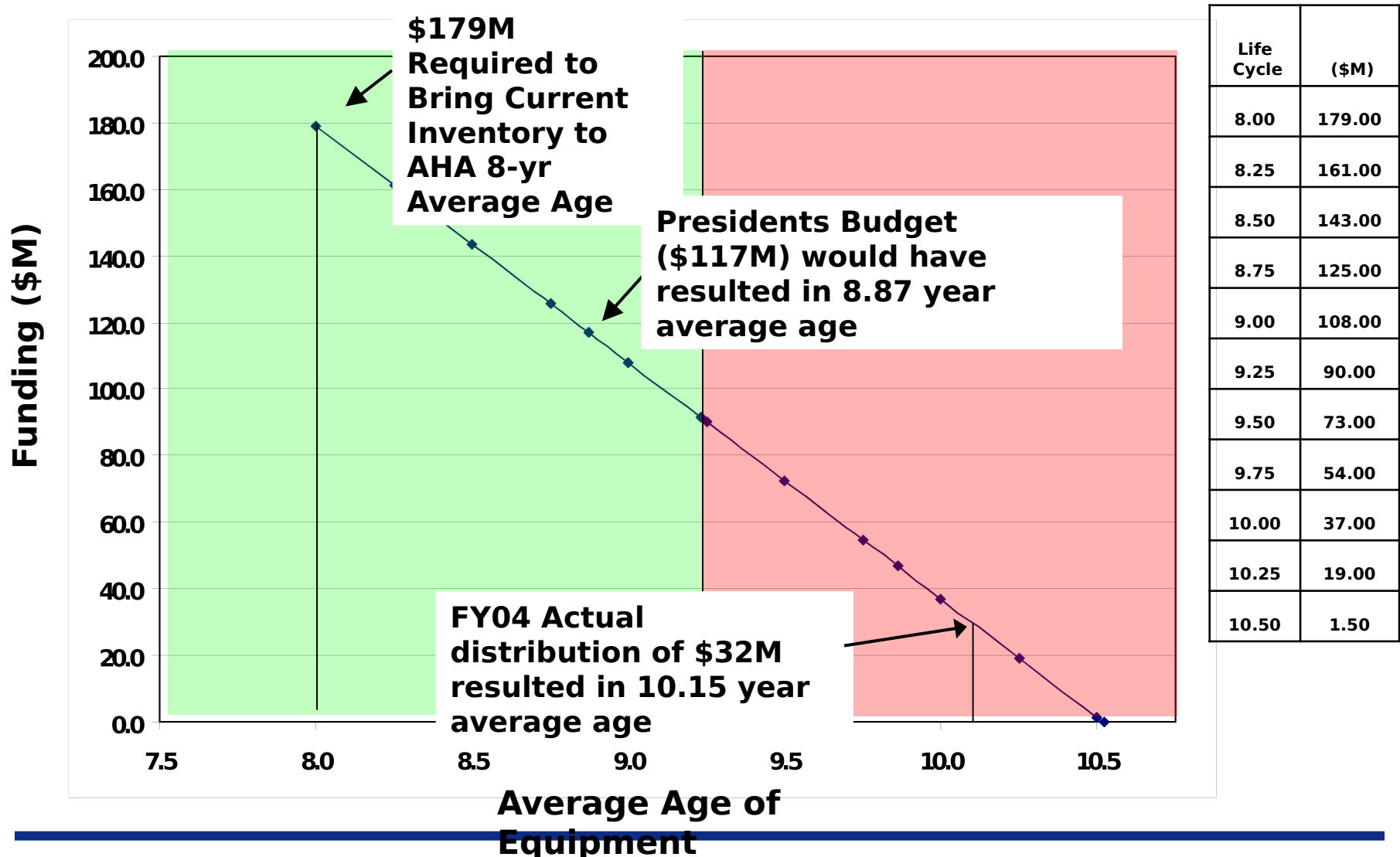
- **Major Hits to SRM and Medical Equipment in FY04:**
 - **SRM Decrementated \$49.1M**
 - **Medical Equipment Decrementated \$85M**



Equipment Funding Impacts

- **FY04 O&M 624 MAJCOM distribution was \$32M**
 - **Original PB was \$117M**
 - **Prior to distribution, \$179M equipment exceeded life expectancy**
- **Best case result - \$147M in equipment that has already exceeded its life expectancy going into FY05**
- **In FY04 alone, average age of medical equipment in AFMS inventory went from 9.23 years to 10.15 years**
 - **AHA recommended useful life averages 8 years**

Equipment Age vs. Funding Level



Equipment Risk

- **Increased Equipment Age Increases Patient Risk and Operating Cost**
 - **Equipment Downtime Increases**
 - **Maintenance Costs Increase**
 - **Failure Rate of Equipment Increases**
 - **Catastrophic Failure is a Risk Management Issue**
 - **Headed Toward Breakdown Life Cycle Management**
 - **Inability to Meet Mandated IM/IT Security Requirements**
 - **Limits Ability to Maintain State-of-Art**
 - **Limited Manufacturer Support Beyond Life Expectancy**
 - **Increased Equipment Downtime Increases Outsourcing of Patient Care**
- **Aging Inventory Results in Uneven Funding Requirements Across the FYDP**

MTF Comparative Cost & Workload Analysis

BACKGROUND:

- Driven by two recent taskers from Mr Ford to the Services: one on examining the Methodology of Valuation of MTF Services and another on Improving the Red, Yellow, Green Efficiencies Metrics.
- Requirement is for an independent analysis of our MTF costs and workload in time for ADJUSTMENT Review

FUNDING 87724f(\$M)		FY2004	FY 2005	FY 2006	FY 2007	FY 2008	FY 2009
CURRENT PROGRAM		0.00	0.00	0.00	0.00	0.0 0	
ADJUSTMENT		.0700	0.00.00	0.00	0.00	0.0 0	
REVISED PGM TOT		0.00	0.00				
		.17	0.00	0.00	0.0 0	0.00	
PROCUREMENT	FY04	FY05	FY06	FY07	FY08	FY09	MANPOWER
NT							OFFICER
							ENLISTED
							CIVILIAN

IMPACTS:

There is a compelling need for the AFMS to be able to understand the methodologies used by TMA in valuating our services and in computing the FYDP efficiencies cuts. Compounding the issue are differences between the Services and being able to identify these. Without better understanding, we acquiesce to TMA's methodology which has severe resource impacts.

SRM Project UFRs

- **198 Projects totaling \$30.1M**
 - **Imminent Engineering System Failures: \$0.604M**
 - **Life Safety: \$2.876M**
 - **Future Bills: \$4.300M**
 - **Engineering Systems Replacement: \$4.474M**
 - **Building Envelope: \$1.961M**
 - **Other SRM: \$15.932M**
- Project List >>>**



Sustainment, Restoration, and Modernization (SRM)

BACKGROUND: FY04 SRM program decremented \$49M (35% of the requirement).

ADJUSTMENT:

\$604K to address urgent SRM requirements. There are \$30M of SRM projects that are still executable before end of fiscal year. This adjustment only addresses the most urgent requirements (identified below).

<u>\$M:</u>	<u>FY04</u>
CURRENT PRG	90.000
ADJUSTMENT	.604
REV PGM	90.604

TOTAL

<u>PROCUREMENT</u>	<u>FY03</u>	<u>FY04</u>	<u>FY05</u>	<u>FY06</u>	<u>FY07</u>	<u>FY08</u>	<u>FY09</u>	<u>FY10</u>	<u>MPWR</u>	<u>FY03</u>	<u>FY04</u>	<u>FY05</u>	<u>FY06</u>	<u>FY07</u>	<u>FY08</u>	<u>FY09</u>	<u>FY10</u>
<u>NT</u>	0	0	0	0	0	0	0	0	OF	0	0	0	0	0	0	0	0
									EN	0	0	0	0	0	0	0	0
									L CIV	0	0	0	0	0	0	0	0

IMPACT

S:

IPL: Y/N MAPPG: Y/N

- **REQUIREMENT: MAJCOMs identified \$30M in FY04 UFR facility projects**
- **4 imminent mechanical system failures require urgent repairs; \$0.504M**
- **Moody HVAC controls (\$0.027M), Vandenburg boiler (\$0.32M), Malmstrom chiller (\$0.13M), Yokota chiller (\$0.027M)**
- **Elmendorf facility maintenance contract claim; \$0.1M**

Unclassified

Medical Equipment

BACKGROUND:

Prior to FY04 distribution, requirement for expense equipment AFMS wide was \$179M . FY04 President's budget provided \$117M for EEIC 624 expense equipment requirements. Ultimate distribution was \$32M, which represents a 27% funding level.

ADJUSTMENT:

Unfunded requirement remains at \$85M for FY04. The AFMS is prepared to execute a minimum of \$30M by end of fiscal year.

<u>FUNDING (\$M):</u>	<u>FY 2004</u>
<u>CURRENT PROGRAM</u>	32.0
<u>ADJUSTMENT</u>	30.0
REVISED PGM TOTAL	62.0

<u>PROCUREMENT</u>	<u>FY04</u>	<u>FY05</u>	<u>FY06</u>	<u>FY07</u>	<u>FY08</u>	<u>FY09</u>	<u>MANPOWER</u>	<u>FY04</u>	<u>FY05</u>	<u>FY06</u>	<u>FY07</u>	<u>FY08</u>	<u>FY09</u>
Total	<u>NT</u>	30.0	0.0	0.0	0.0	0.0	OFFICER	0	0	0	0	0	0
							ENLISTED	0	0	0	0	0	0
							CIVILIAN	0	0	0	0	0	0

IMPACTS:

- Increased equipment age increases patient risk and operating cost.
- Equipment downtime, maintenance cost, and failure rate of equipment increases with average age of inventory, resulting in increased outsourcing of patient care.
- In many cases, aged equipment leads to breakdown life cycle management which risks catastrophic failure and injury or death of patients.
- Older equipment can not meet mandated information assurance requirements.
- In FY04 alone, average age of medical equipment in AFMS inventory went from 9.23 years to 10.15 years
(AHA recommended useful life averages 8 years).

Back-Up Slides

Medical Support Panel FY04 Unfunded Priority List

(\$000)

- | | | |
|---|-------|----------------------------------|
| 1. Coding Front End Solution | 3,910 | Partially Executable by EOY |
| 2. Inpatient Professional Services Coding | 600 | Not Executable, Sustainment Tail |
| 3. HIPAA Privacy/Security Consultants | 2,560 | Not Executable, Sustainment Tail |
| 4. Digital Imaging Program Mgt Office | 850 | Not Executable, Sustainment Tail |
| 5. Contract for MEPRS Support | 500 | Not Executable, Sustainment Tail |
| 6. PMI Program | 4,000 | Funded \$3M in FY04 |
| 7. ECRI Subscription Enhancement | 100 | Low Priority for FY04 |
| 8. Ambulance/Ambus Lease | 1,300 | Not Executable, Sustainment Tail |

NEW UFR SUBMITTALS:

MTF Comparative Cost & Workload Analysis	170
ALL - SRM Facility Projects	30,146
AETC - Medical Equipment	21,737
ACC - Medical Equipment	3,100
AMC - Medical Equipment	2,147
AFSOC - Pediatrics Exam Tables	10
AFMLO - Investment Med Equipment	1,838
USAFA - CT Maintenance Contract	135
USAFA - Radiology RSA Workload Increase	131
USAFA - Housekeeping Contract Increase	60

Unclass CODING FRONT END SOLUTION

BACKGROUND:

3M external audits currently identify ambulatory coding accuracy at 50-60%; inpatient accuracy unknown.

To optimize coding within AFMS, purchase of annually-updated coding references, expansion of external coding audits, targeted post-audit training, and automated

ADJUSTMENT:

collection/reporting system (CARS) are required.

FY02 EOY funded FY03 3M contract & references. FY04 funds references/CARS;

FY05 funds expanded external outpt/inpt audits in Peer 3, 4,& 5; FY06 adds Peer 1 , 2; FY07 out sustains references/CARS

\$M:	FY04	FY05	FY06	FY07	FY08	FY09	FY10	FY11
CURRENT PRG	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
ADJUSTMENT	3.91	6.15	7.10	6.85	6.85	6.85	6.85	6.85
REV PGM	3.91	6.15	7.10	6.85	6.85	6.85	6.85	6.85

TOTAL	PROCUREME	FY03	FY04	FY05	FY06	FY07	FY08	FY09	FY10	MPWR	FY03	FY04	FY05	FY06	FY07	FY08	FY09	FY10
Audit/TrngCo	NT	3.2	3.5	5.8	6.8	6.8	6.8	6.8	6.8	OF	0	0	0	0	0	0	0	0
act		0.0	0.16	0.05	0.05	0.05	0.05	0.05	0.05	EN	0	0	0	0	0	0	0	0
CARS Contract		0.3	0.25	0.25	0.25	0.00	0.00	0.00	0.00	L	0	0	0	0	0	0	0	0
References										CIV	0	0	0	0	0	0	0	0
Contract										K	0	0	0	0	0	0	0	0
										R	0	0	0	0	0	0	0	0

IMPACTS:

IPL: N MAPPG: N

- REQUIREMENT: OSD(HA) memo dated 20 Aug 03 established external coding audits and standards

- UFR responds to 100% coding accuracy requirement with 3-year phased-in approach and sustainment

- CARS=Coding Audit Review System; web-based internal audit collection tool, automatically tallies reports

- Complete and accurate coding will directly contribute to projected increase in TPC of \$30.6M in FY05

- Failure to fund results in non-compliance with OSD(HA) directives for accurate coding in MHS

Unclass

ECRI Health Devices Subscription Enhancements

BACKGROUND:

- (U) AFMLO Currently holds an AF-wide subscription for Health Devices, Sourcebase, and Healthcare Product Comparison System.
- (U) AFI 41-201 requires that all Clinical Engineering departments participate in the subscription.
- (U) New capabilities for tracking medical device alerts are now available from ECRI which will help facilities and the AFMS meet JCAHO EC.6.10.

ADJUSTMENT:

<u>\$M</u> <u>XXXXXXXXXX</u>		<u>FY03</u>	<u>FY04</u>	<u>FY05</u>	<u>FY06</u>	<u>FY07</u>	<u>FY08</u>	<u>FY09</u>	<u>FY10</u>
CURRENT PRG		0.282	0.282	0.282	0.282	0.282	0.282	0.282	0.282
ADJUSTMENT		.000		.100	.100	.100	.100	.100	.100
REV PGM		.100	282	.382	.382	.382	.382	.382	.382
TOTAL		382		382					
<u>PROCUREMENT</u>	<u>FY03</u> <u>FY04</u> <u>FY05</u> <u>FY06</u> <u>FY07</u> <u>FY08</u> <u>FY09</u> <u>FY10</u>								
<u>NT</u>									
		<u>MPWR</u>	<u>FY03</u>	<u>FY04</u>	<u>FY05</u>	<u>FY06</u>	<u>FY07</u>	<u>FY08</u>	<u>FY09</u> <u>FY10</u>
		OF	0	0	0	0	0	0	0
		EN	0	0	0	0	0	0	0
		L CIV	0	0	0	0	0	0	0

IMPACTS:

- Failure to implement Alert Tracker may lead to failure to meet JCAHO Standard EC.6.10
- Potential deployment of equipment that has not been upgraded or modified

AETC FY04 UFR - Equipment

BACKGROUND:

AETC currently funds Medical Equipment purchases for 13 MTFs and the 882nd Training Group.

ADJUSTMENT:

AETC facilities currently have \$21.737M in medical equipment UFRs, EEIC 624.

<u>FUNDING (\$M): PEC</u>	<u>FY 2004</u>	<u>FY 2005</u>	<u>FY 2006</u>	<u>FY 2007</u>	<u>FY 2008</u>	<u>FY 2009</u>
~~STUDENT PROGRAM~~	5.417	16.561	18.004	19.326	20.703	22.185
ADJUSTMENT	21.737					
REVISED PGM TOTAL	27.154	16.561	18.004	19.326	20.703	22.185

<u>PROCUREMENT</u>	<u>FY04</u>	<u>FY05</u>	<u>FY06</u>	<u>FY07</u>	<u>FY08</u>	<u>FY09</u>	<u>MANPOWER</u>	<u>FY04</u>	<u>FY05</u>	<u>FY06</u>	<u>FY07</u>	<u>FY08</u>	<u>FY09</u>
Item 1 <u>NT</u>							OFFICER	0	0	0	0	0	0
Item 2							ENLISTED	0	0	0	0	0	0
							CIV - GS	0	0	0	0	0	0
							RES	0	0	0	0	0	0
							SHARE	0	0	0	0	0	0
							CONTRACT	0	0	0	0	0	0

N/A

IMPACTS:

- Medical equipment funding may not be available to replace medical equipment on schedule
- We are already at a 10-year replacement cycle
- A majority of FY04 equipment funding was used to cover must pay bills
- Medical equipment replacement depends on end of fiscal year fallout funding
- Patient care and safety could be compromised due to increasing equipment age

ACC FY04 UFR - Equipment

BACKGROUND:

ACC currently funds Medical Equipment purchases for 15 MTFs.

ADJUSTMENT:

ACC facilities currently have \$3.1M in medical equipment UFRs, EEIC 624.

<u>FUNDING (\$M): PEC</u>	<u>FY 2004</u>	<u>FY 2005</u>	<u>FY 2006</u>	<u>FY 2007</u>	<u>FY 2008</u>	<u>FY 2009</u>
~~STUDENT PROGRAM~~	3.000					
ADJUSTMENT	3.100					
REVISED PGM TOTAL	6.100					

<u>PROCUREMENT</u>	<u>FY04</u>	<u>FY05</u>	<u>FY06</u>	<u>FY07</u>	<u>FY08</u>	<u>FY09</u>	<u>MANPOWER</u>	<u>FY04</u>	<u>FY05</u>	<u>FY06</u>	<u>FY07</u>	<u>FY08</u>	<u>FY09</u>
Item 1 <u>NT</u>							OFFICER	0	0	0	0	0	0
Item 2							ENLISTED	0	0	0	0	0	0
							CIV - GS	0	0	0	0	0	0
							RES	0	0	0	0	0	0
							SHARE	0	0	0	0	0	0
							CONTRACT	0	0	0	0	0	0

N/A

IMPACTS:

- Medical equipment funding may not be available to replace medical equipment on schedule
- Medical equipment replacement depends on end of fiscal year fallout funding
- Patient care and safety could be compromised due to increasing equipment age

AMC FY04 UFR - Equipment

BACKGROUND:

AMC currently funds Medial Equipment purchases for 12 MTFs including two medical centers and two community hospitals.

ADJUSTMENT:

AMC facilities currently have \$2.1M in unfunded medical/dental equipment requirements, EEIC 624.

<u>FUNDING (\$M): PEC</u>	<u>FY 2004</u>	<u>FY 2005</u>	<u>FY 2006</u>	<u>FY 2007</u>	<u>FY 2008</u>	<u>FY 2009</u>
<u>7700R5H</u>						
<u>87700R5H</u>						
<u>ADJUSTMENT</u>	4.707	8.956	12.053	12.645	14.621	21.872
<u>REVISD PGM TOTAL</u>	2.147					
	6.854	8.956	12.053	12.645	14.621	21.872

<u>PROCUREMENT</u>	<u>FY04</u>	<u>FY05</u>	<u>FY06</u>	<u>FY07</u>	<u>FY08</u>	<u>FY09</u>	<u>MANPOWER</u>	<u>FY04</u>	<u>FY05</u>	<u>FY06</u>	<u>FY07</u>	<u>FY08</u>	<u>FY09</u>
Item 1							OFFICER	0	0	0	0	0	0
Item 2							ENLISTED	0	0	0	0	0	0
							CIV - GS	0	0	0	0	0	0
							RES	0	0	0	0	0	0
							SHARE	0	0	0	0	0	0
							CONTRACT	0	0	0	0	0	0

N/A

IMPACTS:

- Medical equipment funding may not be available to replace medical equipment on schedule
- AMC's medical equipment exceed a 10-year replacement cycle
- All FY04 medical equipment funding provided was spent on medical equipment
- Patient care and safety could be compromised due to increasing equipment age
- Some medical equipment requirements depend on end of fiscal year fallout funding
- Medical equipment not purchases in FY04 will add to the list of UFRs in FY05
- AMC continues to have medical equipment requirements that exceed its available

AFSOC - Pediatrics Exam Tables

BACKGROUND:

Due to FY04 shortages, Moody has been unable to purchase or request funds for requirements in the Pediatrics clinic. A requirement for 5 exam tables (\$7,100) is a patient safety issue. The tables were approved at an ERAA meeting, but due to command shortages, we were unable to address this shortfall.

ADJUSTMENT: None.

<u>FUNDING (\$M):</u>		<u>FY 2003</u>	<u>FY 2004</u>	<u>FY 2005</u>	<u>FY 2006</u>	<u>FY 2007</u>	<u>FY 2008</u>
~~STUDENT PROGRAM~~		\$0.0K	11.4K	0.0	0.0	0.0	0.0
ADJUSTMENT		0.0	10.0	0.0	0.0	0.0	0.0
REVISED PGM TOTAL		\$0.0K	21.4K	0.0	0.0	0.0	0.0

<u>PROCUREMENT</u>	<u>FY03</u>	<u>FY04</u>	<u>FY05</u>	<u>FY06</u>	<u>FY07</u>	<u>FY08</u>	<u>MANPOWER</u>	<u>FY03</u>	<u>FY04</u>	<u>FY05</u>	<u>FY06</u>	<u>FY07</u>	<u>FY08</u>
Item 1 <u>NT</u>							OFFICER	0	0	0	0	0	0
Item 2							ENLISTED	0	0	0	0	0	0
							CIVILIAN	0	0	0	0	0	0
If Applicable							If Applicable						

IMPACTS:

- Patient safety is compromised due to faulty exam tables (\$7,100)
- Workflow efficiency is compromised (\$2,500)

Investment Medical Equipment

~~UFR (100K-250K)~~

Base	Nomenclature	Quote
AF Academy	ENDOSCOPES	\$247,499.00
Charleston	Radiographic System	\$143,583.04
Lackland	Animal Cage Washer	\$102,350.00
MacDill	Ultrasound	\$214,674.35
Scott	Sterilizing Units	\$136,312.80
Scott	X-RAY RAD UNITS, TOMOGRAPHIC	\$166,400.00
Scott	X-RAY RAD UNITS, FIXED	\$162,625.00
Travis	X-RAY RAD UNITS, FIXED	\$167,454.42
Travis	X-RAY RAD UNITS, MAMMOGRAPHIC	\$196,508.80
Wright-Pat	Ultrasound (Cardiology)	\$120,000.00
Scott	Scanner Ultrasonic Cardiac	\$180,857.00
		\$1,838,264.41

USAFA UFR - EEIC 569, Consolidated Radiology Maintenance Contract

BACKGROUND:

Warranty covers LightSpeed QX/I CT Scanner, MRI, and SMV Nuclear Medicine equipment. CT component of contract cost is new requirement due to expiration of warranty. Twenty-four hour coverage required due to critical nature of CT for patient care (e.g., ER care) ...“Fact of Life” increase.

ADJUSTMENT:

Requirements: \$135K - Funded: \$0 = \$135K

FUNDING (\$000):	<u>FY 2004</u>	<u>FY 2005</u>	<u>FY 2006</u>	<u>FY 2007</u>	<u>FY 2008</u>	<u>FY 2009</u>
~~STUDENT~~ PROGRAM	0.0	0.0	0.0	0.0	0.0	0.0
ADJUSTMENT	135	142	149	156	164	172
REVISED PGM TOTAL	135	142	149	156	164	172

<u>PROCUREMENT</u>	<u>FY04</u>	<u>FY05</u>	<u>FY06</u>	<u>FY07</u>	<u>FY08</u>	<u>FY09</u>	<u>MANPOWER</u>	<u>FY04</u>	<u>FY05</u>	<u>FY06</u>	<u>FY07</u>	<u>FY08</u>	<u>FY09</u>
Item 1 <u>NT</u>							OFFICER	0	0	0	0	0	0
Item 2							ENLISTED	0	0	0	0	0	0
							CIVILIAN	0	0	0	0	0	0
If Applicable							If Applicable						

IMPACTS:

- **REQUIREMENT:** \$135K to provide 24-hour maintenance of the CT scanner; critical to patient care
- Failure to fund would result in diminished diagnostic capability; increased risk to patient safety
- Increased cost to government—repair costs are higher without a contract and may be delayed
- Extended down time would increase referrals to network providers, increasing PSC costs; repairs would have to be paid at higher cost without contract in place

USAFA UFR - EEIC 572, Supplemental Care

BACKGROUND:

Radiology RSA workload for TRICARE Plus beneficiaries increased from 5% to 12%.

ADJUSTMENT:

Requirements: \$195 - Funded: \$64K = \$131

<u>FUNDING (\$000):</u>		<u>FY 2004</u>	<u>FY 2005</u>	<u>FY 2006</u>	<u>FY 2007</u>	<u>FY 2008</u>	<u>FY 2009</u>
<u>STUDENT PROGRAM</u>		64	64	64	64	64	64
<u>ADJUSTMENT</u>		131	0	0	0	0	0
<u>REVISED PGM TOTAL</u>		195	64	64	64	64	64

<u>PROCUREMENT</u>	<u>FY04</u>	<u>FY05</u>	<u>FY06</u>	<u>FY07</u>	<u>FY08</u>	<u>FY09</u>	<u>MANPOWER</u>	<u>FY04</u>	<u>FY05</u>	<u>FY06</u>	<u>FY07</u>	<u>FY08</u>	<u>FY09</u>
Item 1 <u>NT</u>							<u>OFFICER</u>	0	0	0	0	0	0
Item 2							<u>ENLISTED</u>	0	0	0	0	0	0
							<u>CIVILIAN</u>	0	0	0	0	0	0
If Applicable							If Applicable						

IMPACTS:

- REQUIREMENT: \$131K in FY04**
- No requirement in FY05 and outyears because RSA will convert to direct contract**

USAFA UFR - EEIC 531, Housekeeping

BACKGROUND:

(1) Contract centrally funded at Air Staff. Colorado Springs faced influenza epidemic in Fall 2003, driving increased frequency of infection control measures to prevent further spread of illness -- \$40K. (2) Additionally, new requirement (not baselined) for Joint Refill Center of \$20K.

ADJUSTMENT:

Requirements: \$195 - Funded: \$64K = \$131

FUNDING (\$000):		FY 2004	FY 2005	FY 2006	FY 2007	FY 2008	FY 2009
~~STUDENT~~ PROGRAM		0	0	0	0	0	0
ADJUSTMENT		60	20	20	20	20	20
REVISED PGM TOTAL		60	20	20	20	20	20

PROCUREMENT	FY04	FY05	FY06	FY07	FY08	FY09	MANPOWER	FY04	FY05	FY06	FY07	FY08	FY09
Item 1	NT						OFFICER	0	0	0	0	0	0
Item 2							ENLISTED	0	0	0	0	0	0
	If Applicable						CIVILIAN	0	0	0	0	0	0
								If Applicable					

IMPACTS:

- REQUIREMENT: \$60K in FY04
- Requirement in FY05 and outyears of \$20K for square footage of Refill Center (unless absorbed in centrally funded contract).

Headquarters U.S. Air Force

Integrity - Service - Excellence

Force Development Major Budget Issue for FY05

August 11, 2004

Lt Col Swinson



U.S. AIR FORCE

Decision Needed for HPSP

- **Health Professions Scholarship Program is FD #1 Priority**
 - **#1 Program for recruiting and training AFMS Providers**
- **FY04 Program \$31.9M, required \$6.3M additional due to cumulative shortfall secondary to double digit inflation**
 - **Tuition inflation cost ave 9.7% vs 5% inflation increase**
 - **Will fully execute \$38.2M**
- **FY05 program baselined at \$40.03M**
 - **Requirements drive \$43.19M, includes \$1.1M for DC 4 years**
- **Request \$3.16M reprogrammed from HPLRP to HPSP**

Impacts

- **If HPSP NOT funded**
- **Inability to start 100 new students (approx 1/3 of recruiting class)**
 - **Program erosion, decreased recruiting and retention**
 - **Increase in private sector care bill in out-years**
- **Impact on Health Professions Loan Repayment Program**
- **Projected FY05 budget \$7.7M**
 - **\$4.54M will cover tails on multi year agreements**
 - **No new starts for FY05**
 - **Primarily affects NC and BSC**

Recommendation

- **Recommend AFMS Group approval of the transfer of \$3.16M funds from HPLRP to HPSP for FY05 program**

Meeting Recap & Calendar

- **New Items**
- **Action Items**
- **Meeting Schedule:**
 - **AFMS Council: Thu, 12 Aug, 0930-1100**
 - **AFMS Group (Ad-hoc) - Tentative: Mon, 16 Aug, 1400-1530**
 - **AFMS Group: Wed, 18 Aug, 1300-1530**